| RECRUIT-A-MEMBER APPLICA  A. Please Print For Accuracy  | TION! Referred   | by:   |  |  |  |  |  |  |
|---|--|---|--|--|--|--|--|--|
| Name of Firm  |  | Date  |  |  |  |  |  |  |
| Individual Designated As Firm's Primary Contact To Receive All NCBFAA Communications  |  |   |  |  |  |  |  |  |
| MrMrsMs Name  | Middle Last<br>Initial Name                            | Title   |  |  |  |  |  |  |
| Street City/Sta<br>Address  | te/Zip   | Country   |  |  |  |  |  |  |
| Phone No. Fax No.   | E-mail<br>Address                                      | Internet<br>Address   |  |  |  |  |  |  |
| B. Select Membership Type (See back of this form before making selection)   |  | AFFILIATE MEMBER  Ocean Carrier  Rail   |  |  |  |  |  |  |
| REGULAR MEMBER/ASSOCIATE MEMBER  Customs Broker: broker license # OTI: FMC license # International Air Freight Forwarder/Air Cargo Agent: CNS/IATA Registration # NVOCC: FMC Bond #   | _  | □ Steamship Agent □ Insurance □ Air Carrier □ Export Packing □ Motor Carrier □ Port Authority □ Bonding □ Attorney/Legal □ Computer Service □ Accountant □ Warehouseman □ Publishing Please attach a brief description of the services you provide. |  |  |  |  |  |  |
| C. Firm Is A  CORPORATION D PARTNERSHIP  D. Please List Branch Office Locations   | SOLE PROPRIETORSHIP Year Establ                        | Number of<br>ished Employees  |  |  |  |  |  |  |
| (Enclose list if more than one)  Street Address   | (Enclose list if more than one)  Street City/State/Zip |   |  |  |  |  |  |  |
| Country   | Phono No   | Eav No.   |  |  |  |  |  |  |
| Country Phone No. Fax No.  E. Please List Any Office Or Any Affiliate Or Subsidiary Company In The United States That Operates As A U.S. Licensed Customs Broker, Ocean Freight Forwarder, Air Cargo Agent, NVOCC And/Or OTI (Enclose list if more than one): |  |   |  |  |  |  |  |  |
| Name of   | Location   | on  |  |  |  |  |  |  |
| F. Enclose Dues Payment In Full – See Categories  | of Membership For Dues Computation and                 | be sure to deduct 10% from the total!   |  |  |  |  |  |  |
| Check enclosed payable to NCBFAA in U.S. funds. No cash, please. (\$15 for returned checks)  Check enclosed payable to VISA Exp. Date MC  American Name Express on Card  Billing Zip Code   | Acct. No.  Signature of Cardholde  Total An            |   |  |  |  |  |  |  |
| G. Signature  |  |   |  |  |  |  |  |  |
| I hereby apply for membership in the National Customs Brokers & Forwarders Association of America, Inc., on behalf of the firm listed above. Our firm agrees to observe and uphold the by-laws of the Association.  |  |   |  |  |  |  |  |  |
| Print Title Name  | Signature  | Date  |  |  |  |  |  |  |



Membership dues are deductible as ordinary and necessary business expenses, but are not deductible as charitable contributions for federal income tax purposes.

National Customs Brokers & Forwarders Association of America, Inc.

1200 18<sup>th</sup> Street NW, Suite 901, Washington, DC 20036 Tel: (202) 466-0222 Fax: (202) 466-0226 e-mail: memb@ncbfaa.org <a href="http://www.ncbfaa.org">http://www.ncbfaa.org</a>



# **Categories of Membership**

## **Regular Member**

Open to firms regularly engaged in business as licensed customs brokers, licensed ocean freight forwarders, international air cargo agents, and non-vessel operating common carriers located within the limits of the United States, its possessions and territories. Each Regular Member firm has one vote in Association matters. This encompasses the firm's branches, affiliates, subsidiaries or related companies.

NCREAA Quarterly Bulletin

### Dues – Be sure to deduct 10% from the total!

\$57 per employee per year (minimum of \$428 and maximum of \$4767) plus \$36 per 100 employees for firms with 100 or more

#### **Benefits**

| • | Full Voting Rights                         | • NCBFAA Quarterly Bulletill |         |                   |          |
|---|--|------------------------------|---------|-------------------|----------|
| • |  |                              | Level 1 | 1-10 employees    | 1 copy   |
| • | Committee Participation                    |                              | Level 2 | 10-29 employees   | 2 copies |
| • | Monday Morning eBriefing – 1 per member    |                              | Level 3 | 30-99 employees   | 3 copies |
| • | FABNET Access                              |                              | Level 4 | 100-499 employees | 4 copies |
| • | Listing in the Annual Membership Directory |                              | Level 5 | 500+ employees    | 5 copies |

- Cable & Wireless Telecommunication Discounts
- Member Discounts on Conferences, Meetings & Seminar Events
- Office Supply Discounts

#### **Affiliate Member**

Open to firms not licensed as customs brokers or freight forwarders but in business as suppliers or vendors of transportation-related services, international business services or products specific to functions with international trade

#### Dues - Be sure to deduct 10% from the total!

Determined by number of employees servicing the broker/forwarder industry.

1-9 employees \$550 10-499 employees \$1,100 500 or more employees \$1,650

### **Benefits**

- NCBFAA Quarterly Bulletin
- Listing in the Annual Membership Directory
- Cable & Wireless Telecommunication Discounts
- Member Discounts on Conferences, Meetings & Seminar Events
- Hyperlink on the NCBFAA Website Membership Directory
- Office Supply Discounts

# **Associate Member**

Open to firms regularly engaged in business as a customs broker and/or international freight forwarder outside the limits of the United States, its possessions and territories.

# Dues – Be sure to deduct 10% from the total!

\$220 a year

# **Benefits**

- NCBFAA Quarterly Bulletin
- Listing in the Annual Membership Directory
- Cable & Wireless Telecommunication Discounts
- Member Discounts on Conferences, Meetings & Seminar Events
- Office supply discounts